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Catch-up Schedule for Routinely Recommended Vaccines for Persons Aged 4 Months–18 Years Who Start Late or Who are ≥ 1 Month Behind — Alaska, 2008

The table below provides catch-up schedules and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age.

CATCH-UP SCHEDULE FOR PERSONS AGED 4 MONTHS–6 YEARS					
Vaccine	Minimum Age for Dose 1	Minimum Interval Between Doses			
		Dose 1 to Dose 2	Dose 2 to Dose 3	Dose 3 to Dose 4	Dose 4 to Dose 5
Hepatitis B	Birth	4 wks	8 wks (and 16 wks after 1 st dose)		
Diphtheria, Tetanus, Pertussis	6 wks	4 wks	4 wks	6 mos	6 mos
Inactivated Poliovirus	6 wks	4 wks	4 wks	4 wks	
Rotavirus	6 wks	4 wks	4 wks		
<i>Haemophilus influenzae</i> type b (PedvaxHIB®)	6 wks	4 wks if 1 st dose administered at age <12 mos			
		8 wks (as final dose) if 1 st dose administered at age 12–14 mos	8 wks (as final dose) if 1 st dose administered at age >12 mos and 2 nd dose given at age ≥ 15 mos		
		No further doses needed if 1 st dose administered at age ≥ 15 mos	No further doses needed if 1 st dose administered at age ≥ 15 mos		
Pneumococcal	6 wks	4 wks if 1 st dose administered at age <12 mos and current age <24 mos	4 wks if current age <12 mos	8 wks (as final dose) This dose only necessary for children aged 12 mos–5 yrs who received 3 doses before age 12 mos	
		8 wks if 1 st dose administered at age ≥ 12 mos or current age 24–59 mos	8 wks (as final dose) if current age ≥ 12 mos		
		No further doses needed for healthy children if 1 st dose administered at age ≥ 24 mos	No further doses needed for healthy children if previous dose administered at age ≥ 24 mos		
Measles, Mumps, Rubella	12 mos	4 wks			
Varicella	12 mos	3 mos			
Hepatitis A	12 mos	6 mos			
CATCH-UP SCHEDULE FOR PERSONS AGED 7–18 YEARS					
Tetanus, Diphtheria/ Tetanus, Diphtheria, Pertussis	Td, 7 yrs Tdap, 11 yrs	4 wks	4 wks if 1 st dose administered at age <12 wks 6 mos if 1 st dose administered at age ≥ 12 mos	6 mos if 1 st dose administered at age <12 mos	
Human Papillomavirus	9 yrs (girls only)	4 wks	12 wks		
Hepatitis A	12 mos	6 mos			
Hepatitis B	birth	4 wks	8 wks (and 16 wks after 1 st dose)		
Inactivated Poliovirus	6 wks	4 wks	4 wks	4 wks	
Measles, Mumps, Rubella	12 mos	4 wks			
Varicella	12 mos	4 wks if 1 st dose administered at age ≥ 13 yrs			
		3 mos if 1 st dose administered at age <13 yrs			

Hepatitis B vaccine (Hep B)

- Administer 3-dose series to those not previously vaccinated.

Diphtheria/ tetanus toxoids & acellular pertussis vaccine (DTaP)

- 5th dose not necessary if 4th dose administered at age ≥ 4 yrs.
- DTaP not indicated for persons aged ≥ 7 yrs.

Inactivated poliovirus vaccine (IPV)

- For children who received an all-IPV or all-OPV series, a 4th dose is not necessary if 3rd dose administered at age ≥ 4 yrs.
- If both IPV and OPV were administered as part of a series, a total of 4 doses should be administered, regardless of child's current age.
- IPV is not routinely recommended for persons aged ≥ 18 yrs.

Rotavirus vaccine (Rota)

- Do not start series if child aged ≥ 13 wks.
- Administer final dose in series by age 32 wks.
- Do not administer a dose if child aged ≥ 33 wks.

Haemophilus influenzae type b conjugate vaccine (Hib)

- Vaccine not generally recommended for children aged ≥ 5 yrs.
- The 3rd dose of PedvaxHIB (the Hib vaccine brand used in Alaska) should be administered at 12–15 mos of age and at least 8 wks after the 2nd dose.
- If 1st dose of PedvaxHIB was administered at age 7–11 mos, administer 2 doses separated by 4 wks plus a booster at age 12–15 mos (at least 2 mos after last dose.)

Pneumococcal conjugate vaccine (PCV)

- Administer 1 dose to all healthy children aged 24–59 mos having any incomplete schedule.

- For children with underlying medical conditions, administer 2 doses at least 8 wks apart if the patient previously received <3 doses, or 1 dose if the patient previously received 3 doses.

Measles, mumps, and rubella vaccine (MMR)

- The 2nd dose of MMR is recommended routinely at age 4–6 yrs but may be administered earlier if desired.
- If not previously vaccinated, administer 2 doses during any visit with ≥ 4 wks between doses.

Varicella vaccine

- The 2nd dose of varicella vaccine is recommended routinely at age 4–6 yrs but may be administered earlier if desired.
- If the immunization history for a person aged <13 years indicates dose 1 and dose 2 were separated by >28 days, but less than the currently recommended interval of 3 mos, dose 2 does not have to be repeated.

Hepatitis A vaccine (Hep A)

- Two doses recommended for all Alaskans.

Tetanus and diphtheria toxoids vaccine (Td) and tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap)

- Tdap should be substituted for a single dose of Td in the primary catch-up series or as a booster, if age appropriate; use Td for other doses.
- A 5-yr interval from the last Td dose is encouraged when Tdap is used as a booster dose. A booster (4th) dose is needed if any of the previous doses were administered at age <12 mos.

Human Papillomavirus Vaccine (HPV)

- Administer to females at age 13–18 yrs if not previously vaccinated.